

Entered 3/1/13

Annual Report of Animal Waste Discharge

Santa Ana Regional Water Quality Control Board
 3737 Main Street, Suite 500
 Riverside, CA 92501-3348
 (951) 782-4130



Reporting Period: January 1, 2012 to December 31, 2012

Report Due Date: January 15, 2013

Facility Information (Please make corrections directly on this form)	
Operator's Name	Gerben Hettinga
Facility Name	GH Dairy #1
Facility Address	Ex. 6 Personal Privacy (PP)
Mailing Address	
Telephone Number	

Does the information provided apply only to the facility address indicated above? ☒ Yes ☐ No

If No, please provide the name and address of the other facilities in the Comments section of this report.

Note: Submit a separate report for each of your facilities including dry cow, heifer, and calf ranches.

Animal Population	Manure Information
No. Milking Cows <u>1,101</u>	Units used below: <input checked="" type="checkbox"/> tons <input type="checkbox"/> cubic yards
No. Dry Cows <u>233</u>	Amount of manure spread on cropland at the facility: _____
No. Heifers <u>1,343</u>	Amount of manure hauled away from your facility: (Please provide copies of all Manure Tracking Manifests showing the hauler name and the destination of the manure.) <u>8720</u>
No. Calves <u>1,303</u>	Amount of manure produced in 2012 that is stockpiled on site as of 12/31/2012: <u>300</u>
Others <u>Bulls</u> <u>28</u>	

Were the production factors provided below used to estimate your manure information?

☒ Yes☒ No

I have complied with Special Provisions Section VII.C.5.f. of Order No. R8-2007-0001 by providing nutrient analysis for the transferred manure.

☐ Yes☐ No

1 Milking cow produces approximately 4.1 tons per year of manure.

1 Dry cow produces approximately 4.1 tons per year of manure.

1 Heifer produces approximately 1.5 tons per year of manure.

1 Calf produces approximately 0.6 tons per year of manure.

1 ton of corral manure equals 2.32 cubic yards.

1 cubic yard of corral manure equals 0.43 tons.

Annual Summary Report of CAFO Weekly Storm Water Management Structure Inspections

Reporting Period: January 1, 2012 to December 31, 2012

Facility Information (Please make corrections directly on this form)	
Operator's Name	Gerben Hettinga
Facility Name	GH Dairy #1
Facility Address	Ex. 6 Personal Privacy (PP)

Was the CAFO Weekly Storm Water Management Structure Inspections Log Sheet completed for the entire year? Yes ☒ No ☐
If No, please explain why the log sheet was not completed for the entire year.

Were there any process wastewater discharge incidents during the year? Yes ☐ No ☒
If Yes, please provide: the date of the incident, how it was discovered (was it during a routine site inspection?), how long did the discharge last, and how it was stopped.

Date of incident	How was it discovered?	How long did it last?	How was it stopped?

Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name of person making this report (please print): Patricia L Mohr
Title: Controller
Signature: Patricia L Mohr
Date: 1/14/2013

Annual Summary Report of CAFO Weekly Storm Water Management Structure Inspections

Reporting Period: January 1, 2012 to December 31, 2012

Facility Information (Please make corrections directly on this form)	
Operator's Name	Gerben Hettinga
Facility Name	GH Dairy #1
Facility Address	Ex. 6 Personal Privacy (PP)

Was the CAFO Weekly Storm Water Management Structure Inspections Log Sheet completed for the entire year? Yes ☒ No ☐
If No, please explain why the log sheet was not completed for the entire year.

Were there any process wastewater discharge incidents during the year? Yes ☐ No ☒
If Yes, please provide: the date of the incident, how it was discovered (was it during a routine site inspection?), how long did the discharge last, and how it was stopped.

Date of incident	How was it discovered?	How long did it last?	How was it stopped?

Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name of person making this report (please print):

Title:

Signature:

Date:

Patricia L Mohr
Controller
Patricia L Mohr
1/14/2013

CAFO Weekly Storm Water Management Structure Inspections Log Sheet

Reporting Period: 1/1/2012 - 12/31/2012
 Facility Name: GH Dairy #1

Week	Date	Initials	OK	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
1	1/1-1/7				0'	1-7-12
2	1/8-1/14				0'	1-14-12
3	1/15-1/21				0'	1-21-12
4	1/22-1/28				0'	1-28-12
5	1/29-2/4				0'	2-4-12
6	2/5-2/11				0'	2-11-12
7	2/12-2/18				0'	2-18-12
8	2/19-2/25				0'	2-24-12

CAFO Weekly Storm Water Management Structure Inspections Log Sheet

Reporting Period: 1/1/2012 - 12/31/2012
 Facility Name: GH Dairy #1

Week	Date	Initials	OK	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
9	3/3 3/26				0'	3-3-12
10	3/4-3/10				0'	3-10-12
11	3/11-3/17				0'	3-17-12
12	3/18-3/24			PvT Hei'fer To eat up weed	0'	3-24-12
13	3/25-3/31				0'	3-31-12
14	4/1-4/7				0'	4-7-12
15	4/8-4/14				3'	4-12-12
16	4/15-4/21				4'	4-21-12
17	4/22-4/28				4'	4-28-12

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Attachment B - Monitoring and Reporting Program

CAFO Weekly Storm Water Management Structure Inspections Log Sheet

Reporting Period: 1/1/2012 - 12/31/2012

Facility Name: GM Dairy #1

Week	Date	Initials	OK	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
18	5/29-5/30				3'	5-5-12
19	5/16-5/12				3'	5-12-12
20	5/13-5/19				2'	5-19-12
21	5/20-5/26				2'	5-26-12
22	5/27-6/2				1'	6-2-12
23	6/3-6/9				1'	6-9-12
24	6/10-6/16				1'	6-16-12
25	6/17-6/23				0	6-23-12
26	6/24-6/30			PVT HieFer To eat weed up	0	6-30-12

CAFO Weekly Storm Water Management Structure Inspections Log Sheet

Reporting Period:

1/1/2012 - 12/31/2012

Facility Name:

CH Dairy #1

Week	Date	Initials	OK	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
27	7/1-7/7				0'	7-7-12
28	7/8-7/14				0'	7-14-12
29	7/15-7/21				0'	7-21-12
30	7/22-7/28				0'	7-28-12
31	7/29-8/4			pvt Heifer To eat weed up	0'	8-4-12
32	8/5-8/11				0'	8-11-12
33	8/12-8/18				0	8-18-12
34	8/19-8/25				0	8-24-12
35	8/26-9/1				0	9-1-12

CAFO Weekly Storm Water Management Structure Inspections Log Sheet

Reporting Period: 1/1/2012 - 12/31/2012
 Facility Name: GH Dairy #1

Week	Date	Initials	OK	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
36	9/12-9/18				0	9-7-12
37	9/19-9/25				0	9-15-12
38	9/26-9/30				0	9-22-12
39	10/1-10/5				0	9-28-12
40	10/6-10/12				0	10-6-12
41	10/13-10/19			put Heifer To eat weed up	0	10-13-12
42	10/20-10/26				0	10-19-12
43	10/27-10/31				0	10-27-12
44	11/1-11/3				0	11-3-12

CAFO Weekly Storm Water Management Structure Inspections Log Sheet

Reporting Period: 1/1/2012 - 12/31/2012

Facility Name: GH Dairy #1

Week	Date	Initials	OK	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
45	11/4-11/10				0'	11-10-12
46	11/11-11/17				0'	11-16-12
47	11/18-11/24				0'	11-24-12
48	11/25-12/1				1'	12-1-12
49	12/2-12/8				2'	12-8-12
50	12/9-12/15				3'	12-14-12
51	12/16-12/22			PUT Heifer To eat up weed	3'	12-21-12
52	12/23-12/31				3'	12-31-12

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Attachment B - Monitoring and Reporting Program



California Regional Water Quality Control Board

Santa Ana Region

Winston H. Hickox
Secretary for
Environmental
Protection

Internet Address: <http://www.swrcb.com>
3737 Main Street, Suite 500, Riverside, California 92501-3119
Phone (909) 782-4130 • FAX (909) 781-1988



Gray Davis
Governor

MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. A hauling event may involve many loads and may last for several days, as long as the manure is being hauled to one destination. Please note that separate forms must be completed for each different destination.

Operator's Name: JESUS PULIDO

Facility Name: G.H. DAIRY # 1

1. Amount of Manure Hauled

of loads hauled: 134 Truck capacity in cubic yards: _____

Total # of cubic yards hauled: _____ Month hauled: _____

2. Hauler's Name PULIDO CRRAL SERVICES

3. Destination of Manure (Write in the name of the composting facility where the manure was hauled. If the manure was hauled to a location other than a composting facility, write in the address, nearest cross streets, or provide a map of the site, and the county where that site is located).

A. Composting facility name: _____

B. Alternate site address or nearest cross streets (only if not a composting facility)

Domenigoni Bros. Ranch

Winchester, Ca.

Riverside

County: _____

I certify under penalty of perjury that the information provided on this form is true and correct to the best of my knowledge and belief.

Operator's signature: _____

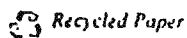
Date: AUG-03-2012

Hauler's signature: _____

Date: AUG-03-2012

This form must be returned by the hauler to the animal confinement facility operator upon completion of each manure hauling event. Each completed form shall be submitted with the animal confinement facility's annual report.

California Environmental Protection Agency





California Regional Water Quality Control Board

Santa Ana Region

Winston H. Hickox
Secretary for
Environmental
Protection

Internet Address: <http://www.swrcb.ca.gov>
3737 Main Street, Suite 500, Riverside, California 92501-3119
Phone (909) 782-1130 • FAX (909) 781-2288



Gray Davis
Governor

MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. A hauling event may involve many loads and may last for several days, as long as the manure is being hauled to one destination. Please note that separate forms must be completed for each different destination.

Operator's Name: Jesus Pulido

Facility Name: G.H. DAIRY # 1

1. Amount of Manure Hauled

of loads hauled: 75 Truck capacity in cubic yards: _____

Total # of cubic yards hauled: _____ Month hauled: _____

2. Hauler's Name Pulido Corral Services

3. Destination of Manure (Write in the name of the composting facility where the manure was hauled. If the manure was hauled to a location other than a composting facility, write in the address, nearest cross streets, or provide a map of the site, and the county where that site is located).

A. Composting facility name: _____

B. Alternate site address or nearest cross streets: (only if not a composting facility)

Domenigoni Bros. Ranch

Winchester, Ca.

County: Riverside

I certify under penalty of perjury that the information provided on this form is true and correct to the best of my knowledge and belief.

Operator's signature: _____

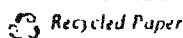
Date: MAY-18-2012

Hauler's signature: _____

Date: MAY-18-2012

This form must be returned by the hauler to the animal confinement facility operator upon completion of each manure hauling event. Each completed form shall be submitted with the animal confinement facility's annual report.

California Environmental Protection Agency





California Regional Water Quality Control Board

Santa Ana Region

Winston H. Hickox

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Gray Davis
Governor

MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. A hauling event may involve many loads and may last for several days, as long as the manure is being hauled to one destination. Please note that separate forms must be completed for each different destination.

Operator's Name: Jesus Pulido

Facility Name: Hein Hettinga Eucalyptus Dairy

1. Amount of Manure Hauled

of loads hauled: 79 Truck capacity in cubic yards: _____

Total # of cubic yards hauled: _____ Month hauled: _____

2. Hauler's Name Pulido Corral Services

3. Destination of Manure (Write in the name of the composting facility where the manure was hauled. If the manure was hauled to a location other than a composting facility, write in the address, nearest cross streets, or provide a map of the site, and the county where that site is located).

A. Composting facility name: _____

B. Alternate site address or nearest cross streets (only if not a composting facility)

Domenigoni Bros. Ranch

Winchester, Ca.

County: Riverside

I certify under penalty of perjury that the information provided on this form is true and correct to the best of my knowledge and belief.

Operator's signature: _____

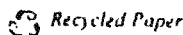
Date: APR-03-2012

Hauler's signature: _____

Date: APR-03-2012

This form must be returned by the hauler to the animal confinement facility operator upon completion of each manure hauling event. Each completed form shall be submitted with the animal confinement facility's annual report.

California Environmental Protection Agency



Manure Tracking Manifest
Santa Ana Regional Water Quality Control Board

Instructions

- 1) Complete one manifest for each hauling event, for each destination. A hauling event may last for several days, as long as the manure is being hauled to the same destination.
- 2) If there are multiple destinations, complete a separate form for each destination.
- 3) The operator must obtain the signature of the hauler upon completion of each manure hauling event.
- 4) The operator shall submit manure tracking manifest(s) with the Annual Report of Animal Waste Discharge to the Santa Ana Regional Water Quality Control Board.

Operator Information

Name of the Operator:

Name of Facility:

GH #1

Facility Address:

Mailing Address:

Phone Number:

Manure Hauler Information

Name of Hauling Company and Contact Person:
Lupe Franco

Phone Number:

Business: 951-3324

Mobile:

Ex. 6 Personal Privacy (PP)

Destination Information

Hauled To (please check one):

- ☐ Composting Facility
- ☐ Riverside County
- ☒ San Bernardino County
- ☐ Other County: _____

Dates Hauled:

11-2-12 ——— 11-3-12

Please give the name and location of the composting operation, or, if the manure was hauled to cropland, the owner or tenant, and the destination address, or nearest cross streets:

Farm Fields

Sam Lewis farms

Ex. 6 Personal Privacy (PP)

Corona CA.

Amount Hauled (enter the amount in the box below and indicate what units are used):

440

☒ TONS

☐ CUBIC YARDS

Certification:

All of the statements contained herein are true and correct to the best of my knowledge and are submitted under penalty of perjury.

Operator's Signature:

Date:

Hauler's Signature:

Date:

Lupe Franco

11-10-12

MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. Only one form is necessary even though a hauling event may involve several loads and may last for several days, as long as the location where the manure is hauled remains the same. Separate forms must be completed for each different destination.

Operator's Name: _____
Facility Name: _____
Facility Address: _____
Mailing Address: _____
Phone Number: _____

Hauler's Name: Larry T. Martinez Phone No. Ex. 6 Personal Privacy (PP)
Amount Hauled: 864 Tons or Cubic Yards Date(s) Hauled: 11-12-2012
(circle one)
Hauled To: 8 Tons per Loads 11-19-2012

☐ Permitted Compost Operation (Name): _____

☐ Other: _____

☒ Within Riverside, San Bernardino or Orange Counties (List the site name and location below. Use address; Section, Township, Range, if known; or the nearest cross streets)

Red Star

Ex. 6 Personal Privacy (PP)

CORONA CA 92882

☐ Outside Riverside, San Bernardino or Orange Counties (List the general location, such as city and county)

Riverside County

I certify under the penalty of perjury that the information provided in this Manure Tracking Manifest form and in any attachments is true and correct to the best of my knowledge and belief.

Operator's Signature: _____ Date: _____

Hauler's Signature: Larry T. Martinez Date: 11-19-2012

This form must be returned by the hauler to the animal confinement facility operator upon completion of each manure hauling event. A copy of each completed form shall be submitted by the animal confinement facility operator to the Regional Water Quality Control Board by January 15 of each year as part of his/her annual report. 11/90

MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. Only one form is necessary even though a hauling event may involve several loads and may last for several days, as long as the location where the manure is hauled remains the same. Separate forms must be completed for each different destination.

Operator's Name: _____
 Facility Name: _____
 Facility Address: _____
 Mailing Address: _____
 Phone Number: _____

Hauler's Name: Larry T. Martinez Phone No. Ex. 6 Personal Privacy (PP)
 Amount Hauled: 4,368 Tons or Cubic Yards Date(s) Hauled: 11-20-2012
 (circle one)
 Hauled To: 8 Tons Per Load 11-28-2012

☐ Permitted Compost Operation (Name): _____

☐ Other:

☐ Within Riverside, San Bernardino or Orange Counties (List the site name and location below. Use address; Section, Township, Range, if known; or the nearest cross streets)

Red Star

Ex. 6 Personal Privacy (PP)

Corona Ca. 92882

☐ Outside Riverside, San Bernardino or Orange Counties (List the general location, such as city and county)

I certify under the penalty of perjury that the information provided in this Manure Tracking Manifest form and in any attachments is true and correct to the best of my knowledge and belief.

Operator's Signature: _____ Date: _____

Hauler's Signature: Larry T. Martinez Date: 11-28-2012

This form must be returned by the hauler to the animal confinement facility operator upon completion of each manure hauling event. A copy of each completed form shall be submitted by the animal confinement facility operator to the Regional Water Quality Control Board by January 15 of each year as part of his/her annual report. 11/90